Campaign Finance & Public Disclosure Board



cfb.mn.gov



Statement of Economic Interest

Candidate for local official position in a metropolitan governmental unit under Minn. Stat. § 10A.01, subd. 22; and 10A.09, subd. 6a

Filing instructions (General instructions for completing the form are on page 2)

- Your statement is due at the governing body of the metropolitan governmental unit within 14 days after signing an affidavit of candidacy.
- This form may be filed by mail or fax sent to the metropolitan governmental unit.
- Address questions to the governing body of the metropolitan governmental unit.

Individual information	Employment information					
Name	Occupation					
Christopher Geisler	IT Security					
Address at which you wish to receive mail from the metropolitan governmental unit (You may use either a home or business address.)	Name of employer - indicate if self-employed or not employed (include employer as a source of compensation on page 3)					
10840 Mississippi Blvd NW	The Toro Company					
City, state, zip	Business address					
Coon Rapids	8111 Lyndale Ave S					
Telephone (daytime)	City, state, zip of business					
763-458-1928	Bloomington, MN 55420					
Name of office	Email Address					
	Christopher.D.Geisler@gmail.com					

Original statement June 2nd , 2020 date filed for office Certification I, Christopher Geisler , certify that the information contained on this form, including (print or type name) information on the schedules on page 3, is complete, true, and correct. Signature of candidate or elected local official Date

Period covered

Notice: Any person who signs and certifies to be true a statement which the person knows contains false information or omlts required information is subject to a civil penalty imposed by the Board of up to \$3,000 and is subject to criminal prosecution for a gross misdemeanor.

This document is available in alternative formats to individuals with disabilities by calling 651-539-1180; 800-657-3889; or through the Minnesota Relay Service at 800-627-3529.

Attach additional pages if necessary to complete any of these schedules.

Name of source			Di-	rector	Officer	Owner	Member	T	ble box	T		
The Toro C	Company			FECTOT	Ciacei	Owner	Member	Partner	Employer	Employee	Honorariu	
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	В	usīness o	r profess	iona	al activ	vity ca	ategori		ck the ann	licable box		
Business or professional activity category (See page 4)					Employee: \$250 In income in morth and owns 25% or more of business			Independent contractor: More than \$2,500 in compensation				
			Sec	urit	ies							
Name of business in which security is held					Name of business in which security is held							
The Toro Company					Vang Midcap Idx Inst							
Vanguard	Target 2050											
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Vanguard	Target 2055											
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County	Street address and city; or section, township, and range			Own	Mortg (Held selle	las (or deed As buyer r seller)	option wor more than \$2,500	th prog	e than ,000	Acreage (it applicable)	
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